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NUTRITION PROGRAM NEWS

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Community Nutrition Training Programs for Dietitians

HELEN P. FOWLER, M.S., *Nutritionist*, CONSUMER AND FOOD ECONOMICS RESEARCH DIVISION

Community nutrition programs are increasing in number and expanding in scope. Nutritionists and workers in allied professions who have responsibility for a variety of community nutrition programs—public health, extension, food distribution—have expressed concern about the preservice training of professional workers.

To help meet the growing need for workers with community nutrition experience, many training groups are revising curriculums and testing existing procedures. For example, the American Dietetic Association—through its requirements for approved dietetic internship programs—has emphasized and expanded its community nutrition training. Although minimum requirements have been established for this community experience, programs vary. A few are combined with a master's degree program, while others offer short observation periods with community programs.

Many of our readers have expressed an interest in learning about the preservice training of community nutrition workers. Therefore, in this issue of NUTRITION PROGRAM NEWS, we describe the community aspect of some of the dietetic internships. We include programs at the University of California School of Public Health, Berkeley; Frances Stern Food Clinic, Boston; and the University of Oklahoma Medical Center, Oklahoma City. We also describe some experiences in other internship programs.

TRAINING PROGRAMS AT THE GRADUATE LEVEL

School of Public Health at Berkeley

The University of California's program combines the dietetic internship with the Master of Public Health curriculum. It is the first of its kind and creates a new concept in the training of nutrition personnel. Public health needs are met by integrating therapeutic and administrative

dietetic nutrition clinic training, and public health nutrition.

The Faculty Internship Director coordinates the training program. She supervises field work and individual student placement; maintains liaison with all cooperating agencies; and plans staff meetings for dietitians, nutritionists, and members of other health-allied groups. The Director is responsible for inviting lecturers and consultants when needed. They are often hospital administrators, doctors, medical assistants, dietitians, and public health nutritionists. The faculties of the School of Public Health and other departments participate in the program. Health agencies in the area also cooperate.

Content of Training.—An aim of the program is to help the students appreciate total health promotion, disease treatment in the community, and the use of research in planning health programs. They are taught to function as nutrition educators while training in a research environment.

A 2-week orientation session introduces the students to the field of health care. An 8-week period of study covers hospital care and dietetics.

The students gain an overall view of the functions of the hospital. They learn to see food "as the patient sees it" and they begin to understand how to plan for quantity feeding.

Classes are held concurrently with field work for three terms. Field work takes students into migrant camps, nursing homes, and other community projects to provide first-hand experience in dealing with nutritional problems. Students meet in seminar sessions at the School of Public Health to discuss this field work.

Other experiences include participating in Head Start and working with the local health department in interviews with families that receive aid for their children (ADC). Students also participate in action programs of community agencies. Some of the interns work with VISTA; others with public school systems.

"New Situations in Community Health," a course offered by the Public Health and Medical Care Administration, gives the interns an opportunity to make case studies on an interdisciplinary basis. These case studies involve new and old problems in community health practices. The students use the team approach and team analysis as methods of finding answers to community problems. The team consists of doctors, nurses, social workers, health educators, and other allied personnel.

The University of California employs on-going community programs to give the interns practical training under "real-life" situations. The experiences acquaint the student with the philosophy and the practice of public health.

Work in Small Hospitals.—After completing the course work, trainees spend the remaining time—about 6 months—in internship programs in small hospitals and clinics. They learn how to meet food needs of patients at all age levels; teach nonprofessional employees; understand systems of food-cost accounting; and obtain more knowledge of the meaning of food in the lives of people.

As a final step, the students spend 8 weeks in field work, serving with a public health agency under the direction of a nutritionist.

Students who meet all prerequisites may complete the program in 19 months.

Frances Stern Food Clinic, Boston

The Frances Stern Food Clinic of the New England Medical Center Hospitals provides an internship program for the food clinic nutritionist leading to the Master of Education degree. This is the only clinic internship approved by the American Dietetic Association.

Tufts University approved the program for graduate credit in 1948. It is a 12-month program; however, candidates who have completed a regular hospital internship may finish in 10 months. Candidates for advanced degrees supplement the internship with one semester of academic study.

The internship counts as 18 credits toward the degree. The intern meets total requirements for the master's degree by supplementing the internship with 12 credits of academic study and 6 credits for the thesis. (A total of 36 credits is required for the M. Ed. degree at Tufts.)

Content of Training.—Courses include methods of educational research, techniques of counseling, advanced educational psychology, and educational sociology or philosophy of education.

The sequence of experiences may vary with the individual intern. During the period that the intern is assigned to the Food Clinic, she becomes familiar with its administration, philosophy, and purpose. She learns to apply the

techniques and skills of interviewing patients. She also learns to refine, adapt, and apply the knowledge of nutrition and diet therapy to the teaching of the normal diet to patients.

Social Service Emphasized.—Orientation to public health nutrition is usually given during the second half of the internship. Earlier, orientation is given in the social service department of the hospital. This sequence provides the intern with insight into environmental factors that may affect the physical and emotional well-being of the individual and an understanding of the multidisciplinary approach to illness.

The intern attends sessions on the philosophy and practice of social work as it relates to community health. Through experience with a case worker, she learns about public and private social resources that may aid in further understanding of the individual in his own environment.

A 2-week assignment with a medical case worker offers an opportunity for home visits and visits to various social agencies. This experience helps to develop a better understanding of the profession of social work—and its importance to an effective public health program.

Seminars.—Orientation to public health begins with a series of seminars on the philosophy, scope, and programs of public health. Field trips to local and State public health agencies follow. One field trip involves a study of the organization and services of a local health department. Trips are also made to a State health department and to other health agencies. The field trips provide an opportunity for the intern to learn about specific programs. She gradually becomes more familiar with public health nutrition and the role of other public health workers making up the multidisciplinary team. The orientation ends with a brief introduction to international health programs.

At this stage of training the intern realizes that the outpatient department of a hospital is a link between the hospital and the community. She gains a perspective of community nutrition by studying functions of health agencies. The intern progresses from "patient-centered" thinking to "family-centered" thinking and then to "community-centered" thinking.

A TRAINING PROGRAM AT THE POST-BACCALAUREATE LEVEL

University of Oklahoma Medical Center

Community nutrition experiences for dietetic interns at the University of Oklahoma Medical Center, Oklahoma City, are broad. Although no graduate program is offered, the experiences are designed to develop attitudes that

should give the intern a desire for further nutrition education. The sequence of experiences is chosen to lead to an understanding of the dietitian's role professionally and personally as a member of the community.

Arrangements for each year's program are flexible. This gives the intern a chance to make maximum use of changing opportunities in the community.

Observation of a Visiting Nurse Association.—

For example, each intern accompanies a staff nurse on a day's field work. This might include a visit to a nursing home, a day-care center, a school, a well-baby clinic, or a patient's home.

The student gains insight into the kinds of knowledge and skills needed by the public health nurse. Such visits provide firsthand information on home situations in the community—usually from homes of low-socioeconomic level. In the Oklahoma program, this provides experience with USDA donated foods.

The interns who visit public schools with public health nurses see the Type A lunch program "in action"—how it is supervised and how it is accepted.

Visits to day-care centers and nursing homes increase awareness of the need for more dietary counseling in group care facilities.

Observation of Dietary Consultant Service.—

The opportunity to observe a consultant dietitian in a small proprietary hospital gives the intern a different kind of experience in food administration. A food service manager plans the meals in this hospital. The trainee sees some of the responsibilities and the limitations found in dietary consultation. The element of time is often a limitation.

The intern also has an opportunity to serve as a dietary consultant to Children's Convalescent Hospital in the Medical Center. She deals with patients who are cared for in convalescent hospitals and she sees kinds of services they receive. Some of the medical staff at Children's Memorial Hospital in the Center are also responsible for medical care service in Children's Convalescent Hospital. The interns have a chance to observe continuity in patient care.

Planning for Nutritional Needs.—The Oklahoma program provides an opportunity to learn the food habits of the people in the State, particularly those from the lower socioeconomic group. Such training is helpful in planning to meet the dietary needs of patients who are discharged from the hospital. The intern takes a nutritional history of the patient before she plans the discharge diet. The history gives information on the socioeconomic level of the patient, his reading ability, and beliefs about food. If he appears to need further help, the patient is referred to a community social service agency.

In Nutrition Clinic, the intern teaches classes held for groups of patients. Regular classes are taught to diabetics,

obstetrical patients (on normal nutrition for the family with emphasis on the mother's needs during and after pregnancy), and new mothers.

Participation in Epidemiological Surveys.—Interns assist at times with dietary surveys. This experience is an outgrowth of the Neurocardiology Research Project conducted in the Department of Medicine at the Center.

First, home interviews are held with selected subjects and the day's food intake is recorded. Interns prepare duplicates of the subjects' 24 hour intakes. The food samples are analyzed in a laboratory by a team physician for total calories and calories from fat.

Information from the home interviews promotes an awareness of existing customs and mores in the community. Reading the results of the food analysis helps the student develop skill in interpreting data.

Field Trips with Consultants.—Interns make several visits with consultants to see the kinds of services that are offered to the community. They visit a cannery with a Food and Drug Administration Inspector; observe a migrant health program with a nutrition consultant; or visit a County Health Department. They participate in a diabetes workshop for Licensed Practical Nurses, or observe a health education program conducted at a State Teachers College.

The types of visits vary from year to year. One year the interns observed an obesity project. They also served as consultants to a small hospital on "can cutting" and the type of food preparation and service suitable for the particular institution.

Federal and State nutritionists are invited at times to meet with the dietetic interns. They describe the organization and structure in such governmental agencies as the U.S. Department of Agriculture and the U.S. Public Health Service. State nutritionists help in this phase of training by describing some of their activities.

The students attend as many professional meetings as possible. The Director considers this necessary for developing a proper attitude toward community nutrition.

INTERNSHIP PROGRAMS

The staff of NUTRITION PROGRAM NEWS asked the Directors of Dietetic Internships to report on programs of training in community nutrition, including both strengths and problems.

Information was received from a number of directors, as well as the California, Massachusetts, and Oklahoma programs discussed in this issue.

Directors and interns agree that time given to total community experiences—while short—is worthwhile. In some training programs, the directors are unable to increase community nutrition activities because of the lack of staff.

Home visits—made in all of the programs reported to us—are a strong point in intern training. Usually, families of low socioeconomic levels are chosen for home visits. Families that have therapeutic problems are also included.

Interns have the opportunity to plan nutrition education programs for such families. These programs involve nutritionists and others in health-allied professions working as a team.

The home environment serves as an appropriate place for the intern to see the interdisciplinary nature of community nutrition. She works as a team member with problems of "vulnerable groups"—the pregnant mother, the geriatric patient, and the teenage girl. In such community affiliations, the intern learns more from observation than from actual practice.

There is need for improved communication between the directors and the interns, with evaluation of the interns' experiences during training. The usual practice is to hold communication and evaluation sessions only at the end of the program.

Unique Features.—Each program has unique features that are particularly valuable. For example, the Nutrition Section of the Michigan Department of Public Health, in cooperation with local health departments, provides community nutrition experiences for interns at the University of Michigan Medical Center, Ann Arbor.

State Health Department consultants assist interns in the study of local health departments. Interns learn how the programs vary to meet local needs. The intern—though primarily an observer—gains some sense of participation in the local programs. She sees how needs vary. A 1-week assignment limits active participation in these local health programs. However, the student writes a report of her experiences and compares different health departments, similar to a consultant's trip report.

At Ohio State University, the Medical Dietetic Program cooperates with the city health department in preparing a Nursing Home News Letter. The News Letter is sent to about 50 nursing homes. The publication offers guidance in nutrition, menu-planning, sanitation, and other topics.

The Ohio State student also visits a nursing home with a city health department nurse. The visit is arranged at lunch time so that the student sees the environment of a nursing home, the type of food served, and the feeding problems involved.

Home Care Programs.—Interns at Freedmen's and Walter Reed Army Hospitals are assigned to the District

of Columbia Department of Public Health in Washington. First, the staff of the Health Department gives interns a 1-day orientation; then the Nutrition Services Division provides 2 weeks of community field experience. Interns also get reading lists; the material helps them obtain an overview of the broad aspects of nutrition in public health programs.

Health departments train and employ a group of sub-professional personnel to assist and improve services provided to patients in their homes. This type of personnel is similar to the hospital nurse's aide. The aides are required to perform tasks related to personal care, physical therapy, occupational therapy, light housekeeping, food buying, and meal preparation.

The Nutrition Services Division of the D. C. Department of Public Health recognizes that these home care programs are growing in communities. To this end, interns are asked to develop a preface and table of contents for a Nutrition Handbook for Health Aides.

The Handbook will serve as a reference of practical information. The health aide will be able to use her knowledge in aspects of normal and therapeutic nutrition. She will consult with the supervising nutritionist.

Interns are also developing a bibliography of references on the relationship of nutritional status to accidents. They will summarize each listing to improve its usefulness.

Community Needs Recognized.—In all programs, interns told Directors that they had no previous idea of the many community programs and services needed. The interns discover for themselves that there is a place for the dietitian-nutritionist in the community. The Directors feel that the internship programs serve as a recruitment device for community service.

FOR THE FUTURE

The American Dietetic Association continues to work toward expanding community nutrition experiences in its requirements for approved internship programs. Progress is being made. The professional dietitian will assume a fuller responsibility with nutritionists and other health workers in the community.

An Association committee prepared guidelines for community experiences in the approved internship programs.

After formal adoption by the Executive Board of the Association at the 1966 annual meeting, the guidelines are to be tested for a year. Then, they will be submitted with suggested changes to the Board for approval at the 1967 annual meeting of the Association.